Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

Self-Hardening Calcium Phosphate Materials with High Resistance to Fracture, Controlled Strength

Histories and Tailored Macropore Formation

Rates

Attorney Docket Number::

10118.00011

Request for Early Publication?::

NO

Request for Non-Publication?::

NO

Suggested Drawing Figure::

Total Drawing Sheets::

2

Small Entity?::

YES

Latin name::

Variety denomination name::

Petition included?::

NO

Petition Type::

Licensed US Govt. Agency::

National Institute of Dental and Craniofacial

militar (1991) The Manney Landson

Research

Contract or Grant Numbers::

R29 DE12476 and DE11789

Initial 03/01/02

Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: **Full Capacity**

Given Name:: Huakun

Middle Name::

Family Name:: Xu

Name Suffix::

City of Residence:: Gaithersburg

State or Province of Residence:: MD

US Country of Residence::

Street of mailing address:: 112 Apple Blossom Way

City of mailing address:: Gaithersburg

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20878

Applicant Authority Type:: Inventor

US Primary Citizenship Country::

Status:: **Full Capacity**

Given Name:: Laurence

Middle Name:: C.

Family Name:: Chow

Name Suffix::

City of Residence:: Potomac

State or Province of Residence:: MD Country of Residence:: US

Street of mailing address:: 11908 Ambleside Drive

Initial 03/01/02

City of mailing address:: Potomac

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20854

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Shozo

Middle Name::

Family Name:: Takagi

Name Suffix::

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State or Province of Residence:: MD

Country of Residence:: US

Street of mailing address:: 17 Leatherleaf Court

City of mailing address:: Gaithersburg

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20878

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Frederick

Middle Name:: C.

Family Name:: Eichmiller

Name Suffix::

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Country of Residence::		US	
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City of mailing address::		Ijamsville	
State or Province of mailing address::		MD	
Country of mailing address::		US	
Postal or Zip Code of mailing address::		21754	
Correspondence	Information		
Correspondence Customer Number:: 22908			
Concepting of the Maniper 22000			
Representative Information			
Representative Customer Number:: 22908			
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Country::	Application number::	Filing Date::	Priority Claimed::
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Assignee Information

Assignee name:: American Dental Association Health

Foundation

Street of mailing address:: 211 East Chicago Avenue

City of mailing address:: Chicago

State or Province of mailing address:: IL

Country of mailing address:: US

Postal or Zip Code of mailing address:: 60611